

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Jun Su	Examiner: Mai Huong C. Tran
Application No: 10/033,590	Group No. 2818
Filed: December 27, 2001	Attorney Docket No: 42390P13376
Title: FLIP-CHIP OPTO-ELECTRIC CIRCUIT	Date: August 15, 2003

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Extension of Time ___ Applicant petitions for an extension of time under 37 C.F.R. § 1.136																	
Papers Enclosed <input checked="" type="checkbox"/> Amendment (5 pages) ___ Replacement Drawing Sheets ___ Supplemental Information Disclosure Statement (2 pages) ___ PTO-1449 Form (1 page) ___ Citations ___ Declaration/Affidavit ___ Terminal Disclaimer ___ Postcard for Return	<table border="1"> <tr> <th rowspan="2">Extension (Months)</th> <th colspan="2">Extension Fee</th> </tr> <tr> <th>Large Entity</th> <th>Small Entity</th> </tr> <tr> <td>___ One Month</td> <td>\$110.00</td> <td>\$55.00</td> </tr> <tr> <td>___ Two Months</td> <td>\$410.00</td> <td>\$205.00</td> </tr> <tr> <td>___ Three Months</td> <td>\$930.00</td> <td>\$465.00</td> </tr> <tr> <td colspan="3">Total \$ 0.00</td> </tr> </table>	Extension (Months)	Extension Fee		Large Entity	Small Entity	___ One Month	\$110.00	\$55.00	___ Two Months	\$410.00	\$205.00	___ Three Months	\$930.00	\$465.00	Total \$ 0.00		
	Extension (Months)		Extension Fee															
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	___ One Month	\$110.00	\$55.00															
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___ Three Months	\$930.00	\$465.00																
Total \$ 0.00																		
<input checked="" type="checkbox"/> Applicant believes that no extension of time is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.																		

Fees for Extra Claims						
	Claims remaining after amendment	Highest number previously paid for	Number Extra	Rate		Additional Fee
				Large Entity	Small Entity	
Total Claims	17	18	0	\$18.00	\$9.00	\$0.00
Independent Claims	3	4	0	\$84.00	\$42.00	\$0.00
Multiple Dependent Claims				\$280.00	\$140.00	\$0.00
Supplemental Information Disclosure Statement				\$180.00	\$180.00	\$0.00
Total						\$0.00

Fee Payment <table border="1"> <tr> <td>Extension Fees</td> <td>\$0.00</td> </tr> <tr> <td>Fee for IDS</td> <td>\$0.00</td> </tr> <tr> <td>Total</td> <td>\$0.00</td> </tr> </table>		Extension Fees	\$0.00	Fee for IDS	\$0.00	Total	\$0.00	Fee Deficiency <input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. <u>02-2666</u> . and/or <input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. <u>02-2666</u> .
Extension Fees	\$0.00							
Fee for IDS	\$0.00							
Total	\$0.00							
___ Attached is check no. _____ in the sum of \$ _____. ___ Please charge \$ _____ to Deposit Account No. _____.		Please continue to send correspondence to: Charles K. Young BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP 12400 Wilshire Blvd. Seventh Floor Los Angeles, CA 90025-1026 (408) 720-8300						
CERTIFICATE OF TRANSMISSION (37 C.F.R. § 1.8a): I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office at 703-872-9318 on the date shown below.		Respectfully Submitted, By: <u>Charles K. Young</u> Date: <u>August 15, 2003</u> Charles K. Young Reg. No. 39,435						
By: <u>Anne Collette</u> Date: <u>August 15, 2003</u> Anne Collette								

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